MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. **FILING DATE**

APPLICANT(S) 09/980199

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				IND.	DEP.	IND.	DEP.	IND	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1	✓							51						
2		✓						52						
3								53						
4		✓						54						
5	✓							55						
6		✓						56						
7								57						
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43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2							TOTAL IND.						
TOTAL DEP.								TOTAL DEP.						
TOTAL CLAIMS	6							TOTAL CLAIMS						

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS   U.S. DEPARTMENT of COMMERCE